

MICHIGAN -- 2001 Nursing Facility Transitions State Grant

Identified Problems with the States' Long-Term Care System

- Based on a medical model focused on treatment not prevention.
- Not outcome oriented.
- Financing is tied to treatment setting.
- Quality of care and quality of life outcomes unclear.
- Family supports are not routinely available.
- Not consumer-driven.
- Fragmented system with no single point of entry.
- No incentives for planning and use of private resources.
- Dual public funding streams create confusion.
- Financial and regulatory obstacles hamper change and progress.
- Lack of skilled, stable direct care workers.
- Lack of affordable, accessible housing.
- Antiquated professional, family, and community attitudes.

Perceived Strengths

- Extensive array of services.
- Reorganization of the Department of Community Health to include the State Medicaid Agency, mental health/substance abuse services, Public Health, and the Office of Services to the Aging.
- Ongoing partnerships with external experts and other agencies.
- Commitment to consumer direction in service delivery.
- Ongoing progressive work.
- History of successful collaboration on housing-service initiatives.
- Commitment to improving the system.

Primary Focus of Grant Activities

- Improved Outreach, Information and Referral Activities and Systems
- Activities to Increase Person-Centered Planning.
- Prevent (divert) nursing home admissions from hospitals and the community.
- Provide case management or support coordination for people in nursing homes.

- Develop instruments or tools to identify people who want to avoid nursing homes or transfer from them.
- Develop a model to use for future transition activity and/or for other states.
- Study cost-effectiveness and evaluate changes in quality of life.
- Increase number of supportive housing units and access to units.
- Assist people to transition to the community.

Goals, Objectives, and Activities

Overall Goal. To establish the capacity within the state to ensure that individuals who wish to transition from nursing facilities (NF) into the community will have access to housing and adequate support provided by community, state, federal, and private sources; and that sufficient analysis and information will become available to avoid precipitous nursing facility placement.

Goal. Transition component: Enhance Michigan's capacity to reach out to nursing home residents and support the transition of individuals who reside in NFs to the community.

Objectives/Activities

- Identify individuals who have been assigned a priority for transition from outreach, PASARR screening, nursing homes, CILs, AAAs, etc. and link individuals with supportive housing initiatives
- Work with Michigan's Supportive Housing Demonstration Projects to build on statewide system improvements in transition services; to create local system improvements to increase the availability of housing options for people leaving nursing homes; and to help identify sources of funding for housing and service needs
- Assure the development of new models for managing housing subsidies in partnership with the state housing authority
- Develop an information and referral system to inform consumers of their options. The system will communicate through the use of phone and Internet systems. The state will create models of service-housing triage that can be accessed by those who are identified by word of mouth, self, agencies, nursing home staff, advocacy organizations, or families, as needed. Current systems, such as the Long-Term Care portal, the Office on Services to the Aging web page, and the E-Michigan web page, will be used.
- Manage the \$100,000 transition fund for direct support of individuals' transition expenses not covered by other resources through a contract with the Corporation for Supportive Housing.

Goal. Diversion component: Establish a model to divert individuals from potential nursing facility placement to remain in their home communities.

Objectives/Activities

- Work with the University of Michigan Hospital's Turner Geriatric Program to identify individuals at risk of NF placement due to a lack of housing or services, and supplement hospital discharge planning for these individuals.
- Work with community collaboratives to help identify sources of funding for housing and service needs.

- Work with Michigan Department of Community Health (MDCH) staff to access housing and service options and relocation assistance resources.
- Work with Michigan's State Housing Development Authority's Community Housing Initiative to divert people into MSHDA housing and to ensure that the necessary supports and services are in place.
- Gather information on promising practices from current hospital-community agency relationships.
- Work with individuals who enter a nursing home from the hospital to assure the nursing home stay is short-term whenever possible.

Goal. Educational component: To provide education and training on specific aspects of this initiative to community collaboratives, health care professionals, and project partners.

Objectives/Activities

- Produce educational materials in multiple formats to inform people of their options for housing and services in the community.
- Work with Michigan's Supportive Housing Demonstration Projects and other community collaboratives to educate members regarding needs of NF residents.
- Work with MDCH project manager to create subsidy and support service initiatives developed in partnership between MDCH and MSHDA.
- Disseminate lessons learned from the project to the general public using methods to be determined.

Goal. Evaluation component: Provide an evaluation of the program and a study of comparative cost-effectiveness of community living versus NF living, using \$350,000 of grant funds.

Key Activities and Products

- Identify individuals who have been identified or assessed as inappropriately remaining in a nursing facility and link them with supportive housing initiatives.
- Educate communities about the needs of consumers and how to meet them.
- Work with hospital staff to identify individuals at risk of NF placement due to a lack of housing/services.
- Work with MDCH to produce educational materials.

Consumer Partners and Consumer Involvement in Planning Activities

The Michigan Department of Community Health's (MDCH) Consumer Advisory Committee was involved in the grant proposal development.

Consumer Partners and Consumer Involvement in Implementation Activities

Community Collaboratives are local consortia in each demonstration community comprising consumers, nonprofits, advocacy groups, local government, and other key stakeholders. This group completes a needs assessment identifying housing needs, specifying supportive housing goals and program funding, and identifying barriers and issues to be addressed. Project staff will create new consortia and work with existing consortia to help identify sources of funding for housing and service needs.

Public Partners

- Michigan State Housing Development Authority (MSHDA).
- Michigan Department of Community Health (MDCH).
- University of Michigan Hospital's Turner Geriatric Program.

Private Partners and Subcontractors

- Corporation for Supportive Housing (CSH).
- MDCH will issue RFPs for two subcontractors for the education and evaluation components.

Public and Private Partnership Development/Involvement in the Planning Phase

Public Partners

The Long Term Care Work Group, a group of MDCH administrators and state legislators formed in 1999, received public input, identified existing problems, developing objectives and guiding principles for long term care. Their preliminary report identified the weaknesses the grant proposal intends to address.

Private Partners

Corporation for Supportive Housing.

Public and Private Partnership Development/Involvement in Implementation

Public Partners

The University of Michigan Hospital will partner to develop an information and referral system to inform consumers of community options, and to identify individuals at risk for institutionalization due to lack of housing and services.

Private Partners

- CSH will provide hands-on technical assistance to local collaboratives to develop and manage housing and to provide support services. CSH will also provide technical assistance to nonprofit housing developers on components of supportive housing development and operations.
- Undetermined subcontractors will perform the education and evaluation components.

Existing Partnerships That Will Be Utilized to Leverage or Support Project Activities

- The state's Supportive Housing Demonstration Program will create an additional 450 housing units, including 150 units for people with LTC needs.
- The state will work with MDCH staff to access housing and service options and relocation assistance resources, to develop educational materials, and to create subsidy and support service initiatives developed in partnership between MDCH and MSHDA.
- The state will work with MSHDA's initiatives to increase available housing and supportive services, including initiatives under development to designate 40 new Section 8 HUD vouchers for people served by the project and to create 150 units for the long-term care group.

Oversight/Advisory Committee

The Long-Term Care Housing Work Group, which includes representatives from each of the partner agencies, will meet regularly to review the status of projects in the targeted communities.

Formative Learning and Evaluation Activities

- The Evaluation Component of the project will develop and implement tools and processes to assess consumer satisfaction with housing and supports. It will also evaluate cost-effectiveness and quality of life indicators.
- Local communities, with MDCH, MSHDA, and CSH assistance, will measure consumer satisfaction.

Evidence of Enduring Change/Sustainability

Transition and diversion programs will be sustained by fully integrating these efforts into the new access system and the new integrated systems of care outlined in the report by the Long Term Care Work Group, a committee of legislators and MDCH administrators.

Geographic Focus

As a result of the reduction in grant funds from the original application, the project will focus in four communities located in the counties of Kent, Washtenaw, and Wayne. Other counties which will be linked to the project through separately funded activities are Allegan, Benzie, Genesee, Grand-Traverse, Kalamazoo, Livingston, Oakland, and Ottawa.